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03/12/98

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	<b>Attorney Docket No.</b> 35.C12844	
	<b>First Named Inventor or Application Identifier</b>	
	MASANORI WAKAI, ET AL.	
	<b>Express Mail Label No.</b>	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification <span style="float: right;">Total Pages <input type="text" value="72"/></span></p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <span style="float: right;">Total Sheets <input type="text" value="20"/></span></p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration <span style="float: right;">Total Pages <input type="text" value="3"/></span></p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Newly executed (original or copy)</p> <p style="margin-left: 20px;">b. <input checked="" type="checkbox"/> Unexecuted for information purposes</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> <i>(Note Box 5 below)</i></p> <p style="margin-left: 40px;">i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4c is checked)</i> <small>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small></p>	<p>6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i></p> <p>7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <p style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Copy</p> <p style="margin-left: 20px;">b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p style="margin-left: 20px;">c. <input type="checkbox"/> Statement verifying identity of above copies</p>
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<b>ACCOMPANYING APPLICATION PARTS</b>
<p>8. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Other: _____</p>

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No. _____
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<b>18. CORRESPONDENCE ADDRESS</b>					
<input type="checkbox"/> Customer Number or Bar Code Label		<small>(Insert Customer No. or Attach bar code label here)</small>		or <input checked="" type="checkbox"/> Correspondence address below	
NAME	FITZPATRICK, CELLA, HARPER & SCINTO				
Address	277 Park Avenue				
City	New York	State	New York	Zip Code	10172-0194
Country	U.S.A.	Telephone	212-758-2400	Fax	212-758-2982



CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	<b>TOTAL CLAIMS</b> (37 CFR 1.16(c))	87-20 -	67	X \$ 22.00 -	\$1474.00
	<b>INDEPENDENT CLAIMS</b> (37 cfr 1.16(b))	3-3 -	0	X \$ 82.00 -	\$ 0.00
	<b>MULTIPLE DEPENDENT CLAIMS</b> (if applicable) (37 CFR 1.16(d))			\$270.00 -	\$ 0.00
				<b>BASIC FEE</b> (37 CFR 1.16(a))	\$ 790.00
	<b>Total of above Calculations -</b>				\$2264.00
	<b>Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).</b>				
	<b>TOTAL -</b>				\$2264.00

19. Small entity status

- a. ☐ A Small entity statement is enclosed
- b. ☐ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. ☐ Is no longer claimed.

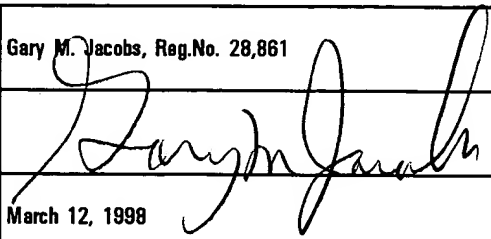
20. ☒ A check in the amount of \$ 2264.00 to cover the filing fee is enclosed.

21. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the recordal fee is enclosed.

22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:

- a. ☒ Fees required under 37 CFR 1.16.
- b. ☐ Fees required under 37 CFR 1.17.
- c. ☐ Fees required under 37 CFR 1.18.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

NAME	Gary M. Jacobs, Reg.No. 28,861
SIGNATURE	
DATE	March 12, 1998